

09675627

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-815)							SERIAL NO. 09675627		FILING DATE 9/29/00		
CLAIMS							APPLICANT(S)				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1							51				
2							52				
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47							97				
48							98				
49							99				
50							100				
TOTAL IND.	7				7		TOTAL IND.				
TOTAL DEP.	38				38		TOTAL DEP.				
TOTAL CLAIMS	45				45		TOTAL CLAIMS				

PTO-1380 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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